


Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 2271/56418-Z-RE		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 34	Total Claims (37 CFR 1.16(j))	(B) 34	**** 0 =	x \$_____ =	or	x \$_____ =	0	
(C) 19	Independent claims (37 CFR 1.16(i))	(D) 19	* 0 =	x \$_____ =		x \$_____ =	0	
Basic Fee (37 CFR 1.16(h)) \$_____							\$ 750_____	
Total Filing Fee \$_____						OR	\$ 750	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$_____ =		x \$_____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$_____ =		x \$_____ =	
Total Additional Fee \$_____						OR	\$_____	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>03-3125</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>750</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p><u>7/3/2003</u> Date</p> </div> <div style="width: 45%; text-align: center;"> <p> Signature of Applicant, Attorney or Agent of Record</p> <p><u>Paul Teng</u> Typed or printed name</p> </div> </div>								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Reissue Application Of: Minoru FUKUDA, et al.
For: MEMORY CONFIGURATION OF A COMPOSITE
MEMORY DEVICE
Reissue Application No.: not yet known
Reissue Application Filing Date: concurrently herewith
Original Patent No.: 6,335,883
Original Patent Granted On: January 1, 2002

1185 Avenue of the Americas
New York, New York 10036


Mail Stop Reissue Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL LETTER OF TRANSMITTAL

Express Mail mailing label number: EV325704220US

Date of Deposit: July 3, 2003

I hereby certify that the above-identified reissue application (consisting of the Abstract, 5-page specification, 34 original patent claims, 6 sheets of formal drawings, Reissue Application Declaration by Inventor, Consent of Assignee, Offer to Surrender Original Patent, Statement under 37 C.F.R. 3.73(b), Statement Pursuant to 37 CFR 1.173(c), Preliminary Amendment, Terminal Disclaimer, 3 copies of transmittal form, a check for the \$750.00 filing fee) is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above and is addressed to **Mail Stop Reissue Application**, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Jamel Rhaab
Cooper & Dunham Employee
Depositing Express Mail Material

Attorney for Applicants:
Ivan S. Kavrukov, Reg. No. 25,161
Cooper & Dunham LLP
Tel. (212) 278-0400

Please type a plus sign (+) inside this box → ☐

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 01/31/2004. OMB 0651-0046
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents
Box Reissue
Washington, DC 20231

Attorney Docket No. 2271/56418-Z-RE
First Named Inventor Minoru FUKUDA
Original Patent Number 6,335,883
Original Patent Issue Date (Month/Day/Year) January 1, 2002
Express Mail Label No.

APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☒ Power of Attorney
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☒ Written Consent of all Assignees (PTO/SB/53)
 - ☒ 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
9. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☒ Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
11. ☐ Original U.S. Patent for surrender
 - ☐ Ribboned Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. Other: Terminal Disclaimer; and
Offer to Surrender.....
Original Patent.....

18. CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label 23432

or ☒ Correspondence address below

Name	Ivan S. Kavrukov				
Address	Cooper & Dunham LLP				
	1185 Avenue of the Americas				
City	New York	State	NY	Zip Code	10036
Country	USA	Telephone	212-278-0400	Fax	212-391-0525

NAME (Print/Type)	Paul Teng	Registration No. (Attorney/Agent)	40,837
Signature	<i>Paul Teng</i>	Date	7/3/2003

Burden Hour Statement: This form is estimated to take 0.2 hour to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.